

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name <u>City of San Jose</u>		RECEIVED Date Stamp DEC 15 2015 City of San Jose Office of the City Clerk mail ET 10:35am	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) <u>Parks, Recreation and neighborhood Services Dept</u>			
Designated Agency Contact (Name, Title) <u>Keila Cisneros</u>		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	
Area Code/Phone Number <u>408 293-5594</u>	E-mail <u>keila.cisneros@sanjosca.gov</u>		

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 99.50

Event Description Music Concert (the weekend) Date(s) 12, 6, 15
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒ If yes: _____
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
<u>City of San Jose Parks Recreation and Neighborhood Services</u>	<u>16</u>	<u>Recognition of outstanding team performance & project success.</u>
<u>Viva Calles Event Team</u>		

B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>

C. Name of Outside Organization (include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

[Signature] Keila Cisneros Recreation Leader 12/14/15
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____